

LOS ANGELES COUNTY / DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS CONTROL PROGRAM
PHONE / UPDATE LOG SHEET

SDMS DOCID# 1123730

CASE NAME FRED R. RIPPY, INC

DATE	TIME	INITIALS	REMARKS
2-29		UN	001 - Issued NOV
5-5-90		UN	Returned phone call of Mr. Richard Rippy and told him to test the 2 - 20 gal black container with TPH
1-14-91		UN	003 - Received Xerox copies of Hazardous Waste Contingency Plan & Employee Training Plan, manifests for the waste oil and waste 1,1,1 Trichloro-ethylene ABATE
1-7-93		By	001 = no violations
2-29-99		JR	Attempted inspection. Business on overdue list. Business closed for the day & may be closed for the week. will revisit next week. WLS
1-05-2000		JR	Inspection. Business on overdue list. Business has eliminated perchloroethylene degreaser & now uses ^{non-hazardous} aqueous degreaser. They eliminated perc from their 1999 HM Disclosure, the only substance they ever disclosed. However, RQ of vanishing oil, waylube oil, oxygen & acetylene observed on-site. HM NOV issued to complete 2731s for these chemicals & send copies to this office. We will keep HM license active. HM NOV issued to provide HM determination on used blasting dust ^{currently} being disposed to trash and provide copy of lab report to this office. Correction dates 02/05/2000. WLS
2-03-2000		JR	Received & Reviewed ^{the following} compliance documents: (1) signed certification of compliance dated 01/28/2000; (2) copy of 2731s for oxygen, lubricating oil, vanishing oil, and acetylene; (3) copy of 1999 BP and Site Map. HM NOV issued 01/05/2000 is abated. Also reviewed (4) copy of 17CAM Metal Test for used sandblast/beadblast dust performed 01/13/2000 by West Coast Analytical Service 9840 Albertis Ave. Santa Fe Springs, 90670 (562) 948-2235. Per TTLC ^{on 01/13/2000} Chromium, Copper, lead and Nickel were > 10X STLC, although all metals were < TTLC limit.

Date 11-29-90 Time

PHL#

Los Angeles County
Hazardous Materials Control Program
Industry Survey Continuation Sheet

Insp. 071 Page 2 of 2

DBA

Interviewed

P R O C E S S F L O W C H A R T

process & materials → hazardous waste & rate generated → storage method (drum/AST/UST) → hauler manifest number & date → disposal method / environmental fate

Degreaser 1, 1, 1 TCA → parts are dipped

→ 125 gal waste
1, 1, 1 TCA
90 days

→ sometimes pumped & sometimes stored in 55 gal drums

#88 336734 → BARON
5-22-89 → BLAKELEE
most current one? Recycled

Machine Shop for tooling and only use grease and cutting oil

(m)

Violations / Remarks observed a spray booth and I was informed by Mr Rippy that is no longer in use and is used now as a storage area.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD008277394	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Fred R. Rippey Co., 12471 E. Washinton Blvd. Whittier, CA 90602			A. State Manifest Document Number 84547674		B. State Generator's ID	
4. Generator's Phone (213) 698-9801			C. State Transporter's ID 708522		D. Transporter's Phone 213/640-9732	
5. Transporter 1 Company Name Baron-Blakeslee, Inc.			6. US EPA ID Number ICAD980892442		E. State Transporter's ID	
7. Transporter 2 Company Name			8. US EPA ID Number		F. Transporter's Phone	
9. Designated Facility Name and Site Address Omega Recovery Services 12504 East Whittier Blvd. Whittier, CA 90602			10. US EPA ID Number ICAD042245001		G. State Facility's ID	
					H. Facility's Phone 213/698-0991	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Waste 1, 1, 1-Trichloroethane mixture ORM-A UN 2831			No. 003	Type DM	00145	G 211
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above 1, 1, 1-Trichloroethane 80% Oil 75% Water 5%			K. Handling Codes for Wastes Listed Above 201			
15. Special Handling Instructions and Additional Information Gloves, goggles, organics respirator, protective overgarment. Avoid skin contact						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name J. HARRIS			Signature <i>J. Harris</i>		Date 5/20/86	
17. Transporter 1 Acknowledgement of Receipt of Materials			Printed/Typed Name Joe Di Tella		Signature <i>Joe Di Tella</i>	
					Date 5/20/86	
18. Transporter 2 Acknowledgement or Receipt of Materials			Printed/Typed Name		Signature	
					Date	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name JAVIER HERNANDEZ			Signature <i>Javier Hernandez</i>		Date 5/21/86	

Los Angeles County Fire Dept.
Hazardous Materials Office 6/26/02

Form Approved OMB No. 2050-0039 (Expires 9-30-92)
Please print or type. (Form designed for use on elite pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD008277394	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address FRED R. RIPPY, 12471 E. WASHINGTON WHITTIER, CA 90602				A. State Manifest Document Number 88336734		
4. Generator's Phone 213 698-9801				B. State Generator's ID EXEMPT		
5. Transporter 1 Company Name BARON-BLAKESLEE		6. US EPA ID Number CAD980892442		C. State Transporter's ID 905455		
7. Transporter 2 Company Name Orange County Chemical Company		8. US EPA ID Number CAD029363876		D. Transporter's Phone 213/640-9732		
9. Designated Facility Name and Site Address BARON-BLAKESLEE 8333 ENTERPRISE DR NEWARK, CA 94560		10. US EPA ID Number CAD074644659		E. State Transporter's ID (714)546-9901		
				F. Transporter's Phone (714)546-9901		
				G. State Facility's ID 415/794-6511		
				H. Facility's Phone 415/794-6511		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. R.Q. WASTE 1,1,1-TRICHLOROETHANE MIXTURE ORM-A, UN2831 (CONTAINS: 1,4-DIETHYLENE DIOXIDE (F001))		001 DM	0.0055	G	State 211 EPA/Other F001	
b.					State EPA/Other	
c.					State EPA/Other	
d.					State EPA/Other	
J. Additional Descriptions for Materials Listed Above 1,1,1-TRICHLOROETHANE OIL WATER		K. Handling Codes for Wastes Listed Above a. b. c. d.				
15. Special Handling Instructions and Additional Information GLOVES, GOGGLES, ORGANICS RESPIRATOR, PROTECTIVE OVERGARMENT. AVOID SKIN CONTACT.						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Virgil L. Childs		Signature <i>Virgil L. Childs</i>		Month Day Year 12 22 99		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Michael Childs		Signature <i>Michael Childs</i>		Month Day Year 05 22 00		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name D. C. Bennett		Signature <i>D. C. Bennett</i>		Month Day Year 12 22 99		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name John Benavidez		Signature <i>John Benavidez</i>		Month Day Year 05 22 00		

522 A (1/88)

18700-22

v. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

88435412

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.2. Page 1
of 1Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

Fred R. Rippey, 12471 E. Washington

Whittier, CA 90602

4. Generator's Phone (213) 698-9801

5. Transporter 1 Company Name

Baron-Blakeslee

6. US EPA ID Number

ICAD980892442

7. Transporter 2 Company Name

Baron-Blakeslee

8. US EPA ID Number

ICAD074644659

9. Designated Facility Name and Site Address

Baron-Blakeslee

8333 Enterprise Drive

Newark, CA 94560

10. US EPA ID Number

ICAD074644659

A. State Manifest Document Number

88435412

B. State Generator's ID

C. State Transporter's ID

110275

D. Transporter's Phone

213-640-9732

E. State Transporter's ID

106577

F. Transporter's Phone

415-794-6511

G. State Facility's ID

H. Facility's Phone

415-794-6511

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste 1,1,1-Trichloroethane Mixture ORM-A UN2831

12. Containers
No. Type

001 DM 00035

13. Total
Quantity14. Unit
Wt/Vol

15. Waste No.

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

a. L/T Trichloroethane 80%

Oil 10%

Water 10%

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

15. Special Handling Instructions and Additional Information

Appropriate protective clothing and respirators.

24 Hour Emergency Number 1-800-424-9300

16.

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

PHL# 124810 **INDUSTRY SURVEY** Los Angeles County Fire Department • Prevention Bureau
Health Hazardous Materials Division LACoFD HHMD • IS1 v3.2 • 4/93

Code 101 SIC# 3544 EPA# CAD008277394 ☐ Pending ☐ NA

DBA FRED R. RIPPY, INC. Phone 310-698-9801

Owner " " " " Interviewed Virgin Vig

Partner FRANCINE RIPPY, PRES Title Plant Mgr.

Address 12471 E WASHINGTON BL Product/Service MFG/LAMINATION FOR ELECTRIC MOTORS

unit # City WHI Zip 90602

Mailing Start Date 1/1/66 # of employees 26

of shifts 1 Operating hours 8-4:30

Viol Rank CA Waste Code 1 221 2 3 4

☐ HWUT Amt (PGT) Pounds, Gallons, Tons; per quarter 10 gals

☐ HRF Mtl/Qty

Referrals ☐ AQMD ☐ B&S ☐ Fire ☐ IW ☐ OSHA ☐ SDHS ☐

Viol 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33
34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 99

Visit Date	Start Time	Insp	Action	Time Invested	Special Circumstances
09/07/93	10:30	005	IO	01:20	
/ /	:			:	
/ /	:			:	
/ /	:			:	

Signature(s) Syarrane

Action codes: A-Abate C-Complaint E-Enforce H-Hearing I-Insp M-site Mit N-NOV O-no viol P-PHL Inv R-Revisit S-Samples T-Time ext X-other Z-non-gen

HUGE Machine Shop

Raw material = Coils of steel (cold roll, silicon), some Al, alloys, Ni

→ punch/stamping presses → ^{vapor} degreaser = use 1-1-1 TCA

Waste 1-1-1 TCA → 55 gal drum → ^{is labeled} 91698794 30 gals 7/8/92 RHO-CATRN

→ customers or to annealing process (private contractor)

→ waste oil (primarily from changing oil of 1 machine) → 55 gal drum → Safety-Kleen 527201 (Texas) 85 gals 6/8/93

me

Los Angeles County Fire Department
Los Angeles County Certified Unified Program Agency
CHEMICAL DESCRIPTION (OES 2731)

☐ ADD ☐ DELETE ☐ REVISE 57

REPORTING YEAR 1997

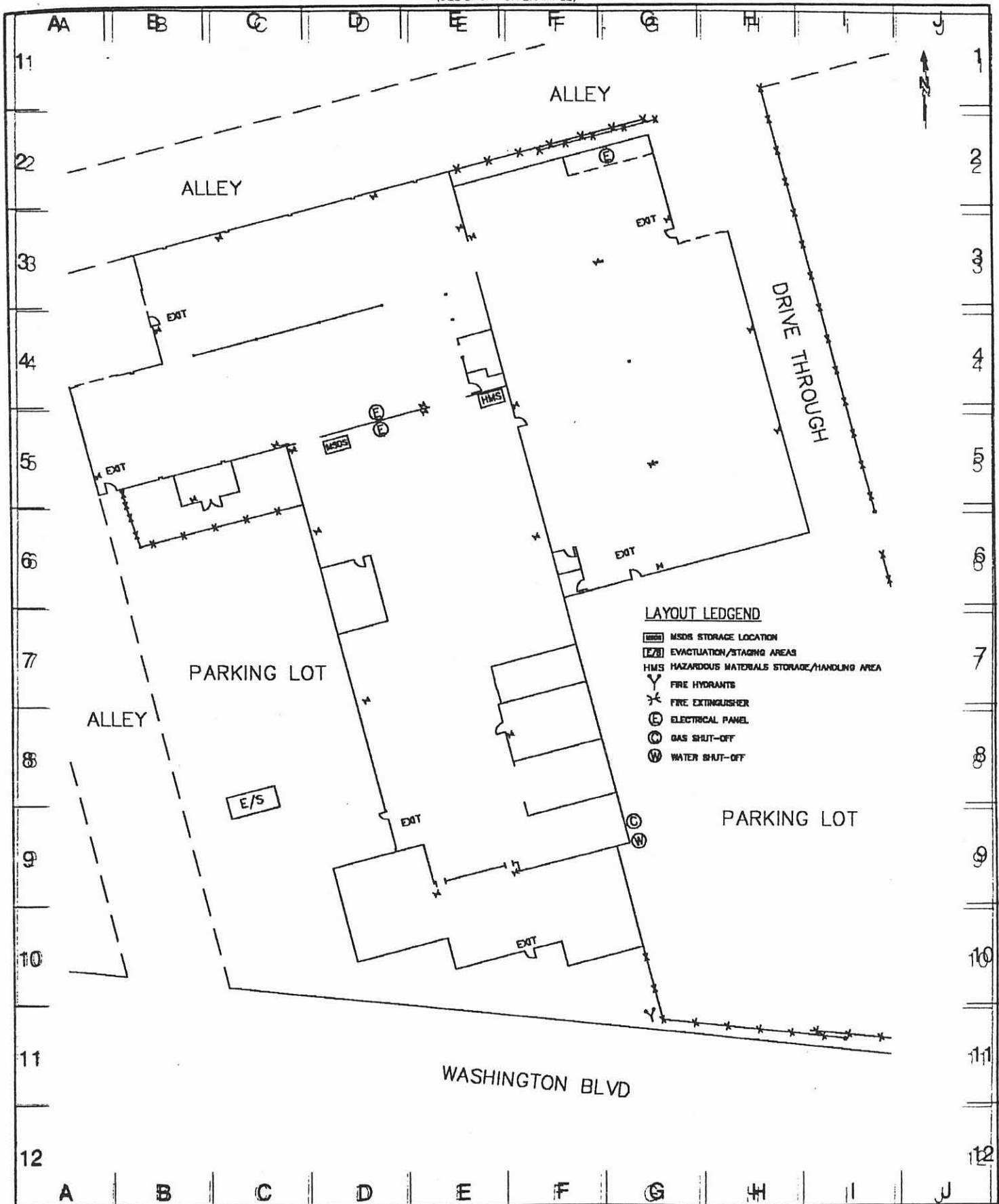
PAGE ____ OF ____ 21

BUSINESS NAME FRED R. RIPPY, INC.				3																			
CHEMICAL LOCATION NORTH WALL OF BLDG.				58																			
MAP #	59	GRID #	60	FACILITY ID # 019 / 999 / 05309																			
CHEMICAL NAME TETRACHLOROETHYLENE			61	TRADE SECRET <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																			
COMMON NAME PERCHLOROETHYLENE			63	* REGULATED SUBSTANCE (RS) <input type="checkbox"/> YES <input type="checkbox"/> NO																			
CAS # 127-18-4			64	* If YES, all amounts must be in pounds.																			
FIRE CODE HAZARD CLASSES (NFPA 704) <input type="checkbox"/> HEALTH <input type="checkbox"/> FLAMMABILITY <input checked="" type="checkbox"/> REACTIVITY <input type="checkbox"/> ADDITIONAL INFORMATION				65																			
TYPE <input checked="" type="checkbox"/> PURE <input type="checkbox"/> MIXTURE <input type="checkbox"/> WASTE	66	RADIOACTIVE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	67	CURIES																			
PHYSICAL STATE <input type="checkbox"/> SOLID <input checked="" type="checkbox"/> LIQUID <input type="checkbox"/> GAS				69																			
FEDERAL HAZARD CATEGORIES <input type="checkbox"/> FIRE <input type="checkbox"/> REACTION <input type="checkbox"/> PRESSURE RELEASE <input type="checkbox"/> ACUTE HEALTH <input checked="" type="checkbox"/> CHRONIC HEALTH				70																			
STATE WASTE CODE F001	71	UNITS * <input checked="" type="checkbox"/> GAL <input type="checkbox"/> CU FT <input type="checkbox"/> LBS <input type="checkbox"/> TONS	74	MAX DAILY AMOUNT 2800 LBS.																			
DAYS ON SITE 365	73	AVG DAILY AMOUNT 1137 LBS.																					
LARGEST CONTAINER 55 GAL	76	ANNUAL WASTE AMOUNT 55 GAL																					
STORAGE CONTAINER CODE - CHECK THE APPROPRIATE BOX BELOW				78																			
<table style="width:100%; border: none;"> <tr> <td>A <input type="checkbox"/> ABOVEGROUND TANK</td> <td>F <input type="checkbox"/> CAN</td> <td>K <input type="checkbox"/> BOX</td> <td>P <input type="checkbox"/> TANK WAGON</td> </tr> <tr> <td>B <input type="checkbox"/> UNDERGROUND TANK</td> <td>G <input type="checkbox"/> CARBOY</td> <td>L <input type="checkbox"/> CYLINDER</td> <td>Q <input type="checkbox"/> RAIL CAR</td> </tr> <tr> <td>C <input type="checkbox"/> TANK INSIDE BUILDING</td> <td>H <input type="checkbox"/> SILO</td> <td>M <input type="checkbox"/> GLASS BOTTLE</td> <td></td> </tr> <tr> <td>D <input type="checkbox"/> STEEL DRUM</td> <td>I <input type="checkbox"/> FIBER DRUM</td> <td>N <input type="checkbox"/> PLASTIC BOTTLE</td> <td></td> </tr> <tr> <td>E <input checked="" type="checkbox"/> PLASTIC/NONMETALLIC DRUM</td> <td>J <input type="checkbox"/> BAG</td> <td>O <input type="checkbox"/> TOTE BIN</td> <td></td> </tr> </table>				A <input type="checkbox"/> ABOVEGROUND TANK	F <input type="checkbox"/> CAN	K <input type="checkbox"/> BOX	P <input type="checkbox"/> TANK WAGON	B <input type="checkbox"/> UNDERGROUND TANK	G <input type="checkbox"/> CARBOY	L <input type="checkbox"/> CYLINDER	Q <input type="checkbox"/> RAIL CAR	C <input type="checkbox"/> TANK INSIDE BUILDING	H <input type="checkbox"/> SILO	M <input type="checkbox"/> GLASS BOTTLE		D <input type="checkbox"/> STEEL DRUM	I <input type="checkbox"/> FIBER DRUM	N <input type="checkbox"/> PLASTIC BOTTLE		E <input checked="" type="checkbox"/> PLASTIC/NONMETALLIC DRUM	J <input type="checkbox"/> BAG	O <input type="checkbox"/> TOTE BIN	
A <input type="checkbox"/> ABOVEGROUND TANK	F <input type="checkbox"/> CAN	K <input type="checkbox"/> BOX	P <input type="checkbox"/> TANK WAGON																				
B <input type="checkbox"/> UNDERGROUND TANK	G <input type="checkbox"/> CARBOY	L <input type="checkbox"/> CYLINDER	Q <input type="checkbox"/> RAIL CAR																				
C <input type="checkbox"/> TANK INSIDE BUILDING	H <input type="checkbox"/> SILO	M <input type="checkbox"/> GLASS BOTTLE																					
D <input type="checkbox"/> STEEL DRUM	I <input type="checkbox"/> FIBER DRUM	N <input type="checkbox"/> PLASTIC BOTTLE																					
E <input checked="" type="checkbox"/> PLASTIC/NONMETALLIC DRUM	J <input type="checkbox"/> BAG	O <input type="checkbox"/> TOTE BIN																					
STORAGE PRESSURE <input checked="" type="checkbox"/> AMBIENT <input type="checkbox"/> ABOVE AMBIENT <input type="checkbox"/> BELOW AMBIENT				79																			
STORAGE TEMPERATURE <input checked="" type="checkbox"/> AMBIENT <input type="checkbox"/> ABOVE AMBIENT <input type="checkbox"/> BELOW AMBIENT <input type="checkbox"/> CRYOGENIC				80																			
% WT	HAZARDOUS COMPONENT		RS*	CAS #																			
1	81	82	<input type="checkbox"/> YES <input type="checkbox"/> NO	83																			
2	85	86	<input type="checkbox"/> YES <input type="checkbox"/> NO	87																			
3	89	90	<input type="checkbox"/> YES <input type="checkbox"/> NO	91																			
4	93	94	<input type="checkbox"/> YES <input type="checkbox"/> NO	95																			
5	97	98	<input type="checkbox"/> YES <input type="checkbox"/> NO	99																			

* IF THE CHEMICAL IS A REGULATED SUBSTANCE AND MEETS OR EXCEEDS ITS THRESHOLD QUANTITY IN A PROCESS, THE AMOUNTS MUST BE REPORTED IN POUNDS, AND REGISTERED WITH THIS DEPARTMENT BY COMPLETING THE REGULATED SUBSTANCE REGISTRATION (OES FORM 2735.6) ON THE REVERSE SIDE OF THIS FORM.

OFFICIAL USE ONLY

DATE REC'D				REVIEWED BY			
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA	



BUSINESS NAME

FRED R. RIPPY, INC.

ADDRESS

12471 E. WASHINGTON BLVD., WHITTIER, CA 90602

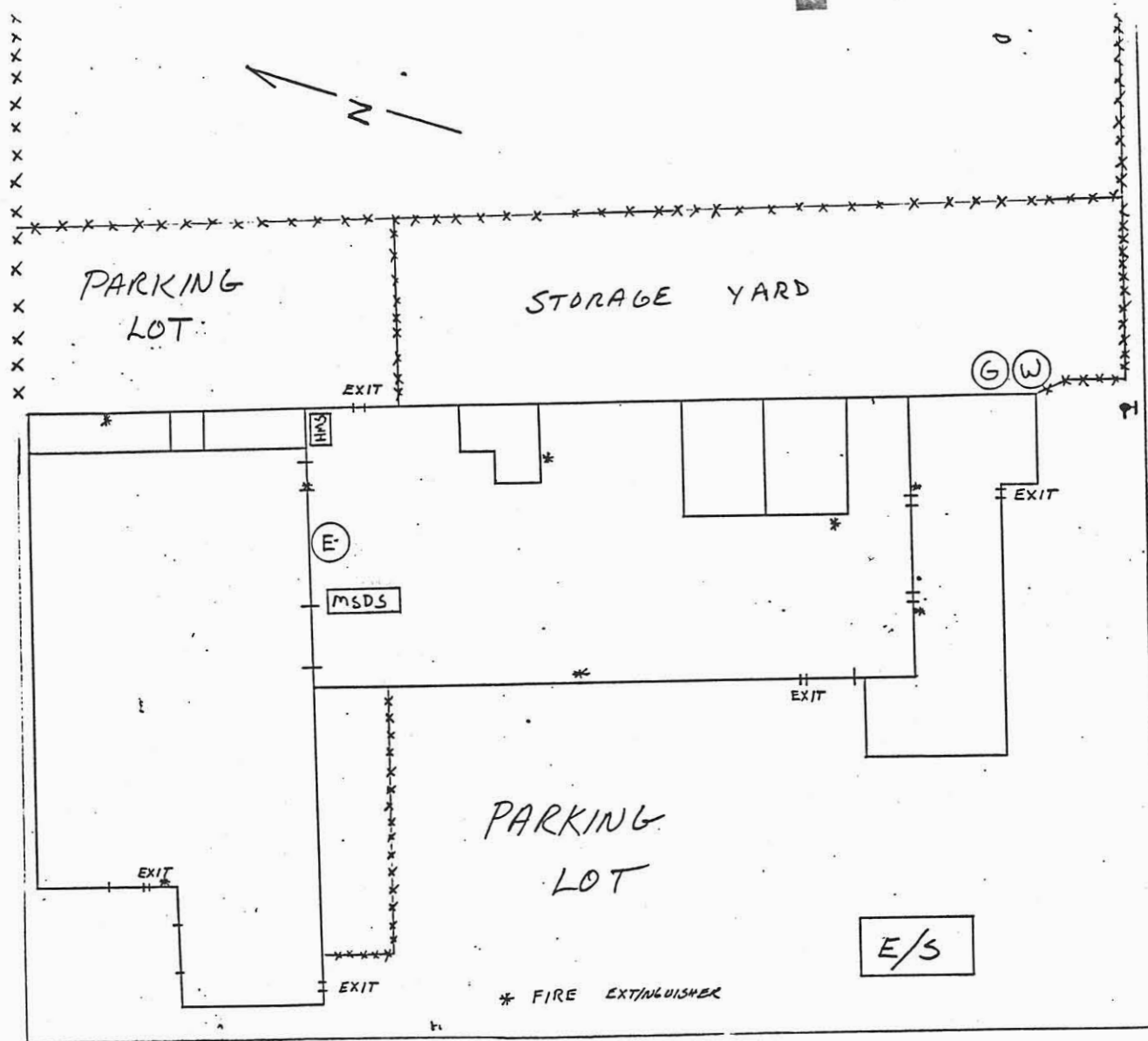
CITY

ZIP CODE

10/10

019-999-05309

ALLEY



ALLEY

WASHINGTON BLVD.

LAYOUT LEGEND:

- FIRE HYDRANTS
- EVACUATION/STAGING AREA
- MSDS STORAGE LOCATION
- FIRE EXTINGUISHER
- ELECTRICAL PANEL
- GAS SHUT-OFF
- WATER SHUT-OFF



Los Angeles County • Certified Unified Program Agency
CHEMICAL DESCRIPTION (OES 2731)

☐ ADD ☐ DELETE ☐ REVISE

200

REPORTING YEAR 1998

PAGE OF 102

BUSINESS NAME		3
FRED R. RIPPY, INC.		
CHEMICAL LOCATION	201	CONFIDENTIAL (EPCRA) 202
NORTH WALL OF BLDG		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
MAP #	203	GRID #
		204
FACILITY ID#		1
19 / 999 / 05309		
CHEMICAL NAME	205	TRADE SECRET 206
TETRACHLOROETHYLENE		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
COMMON NAME	207	* REGULATED SUBSTANCE (RS) 208
PERCHLOROETHYLENE		<input type="checkbox"/> YES <input type="checkbox"/> NO
CAS #	209	* If YES, all amounts must be in pounds
127-18-4		
FIRE CODE HAZARD CLASSES 210		
<input type="checkbox"/> HEALTH <input type="checkbox"/> FLAMMABILITY <input checked="" type="checkbox"/> REACTIVITY <input type="checkbox"/> ADDITIONAL INFO		
TYPE	211	RADIOACTIVE 212
<input checked="" type="checkbox"/> PURE <input type="checkbox"/> MIXTURE <input type="checkbox"/> WASTE		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CURIES		
PHYSICAL STATE 214		
<input type="checkbox"/> SOLID <input checked="" type="checkbox"/> LIQUID <input type="checkbox"/> GAS		
FEDERAL HAZARD CATEGORIES 216		
<input type="checkbox"/> FIRE <input type="checkbox"/> REACTION <input type="checkbox"/> PRESSURE RELEASE <input type="checkbox"/> ACUTE HEALTH <input checked="" type="checkbox"/> CHRONIC HEALTH		
STATE WASTE CODE	217	UNITS * 221
F001		<input checked="" type="checkbox"/> GAL <input type="checkbox"/> CU FT
DAYS ON SITE	220	<input type="checkbox"/> LBS <input type="checkbox"/> TONS
365		
LARGEST CONTAINER	215	* If Regulated Substance, amount must be reported in pounds.
55 GAL		
MAX DAILY AMOUNT		218
2800 LBS.		
AVG DAILY AMOUNT		222
1137		
ANNUAL WASTE AMOUNT		224
55 GAL		

STORAGE CONTAINER CODE - CHECK THE APPROPRIATE BOX BELOW 226			
A <input type="checkbox"/> ABOVEGROUND TANK	F <input type="checkbox"/> CAN	K <input type="checkbox"/> BOX	P <input type="checkbox"/> TANK WAGON
B <input type="checkbox"/> UNDERGROUND TANK	G <input type="checkbox"/> CARBOY	L <input type="checkbox"/> CYLINDER	Q <input type="checkbox"/> RAIL CAR
C <input type="checkbox"/> TANK INSIDE BUILDING	H <input type="checkbox"/> SILO	M <input type="checkbox"/> GLASS BOTTLE	<input type="checkbox"/> _____
D <input type="checkbox"/> STEEL DRUM	I <input type="checkbox"/> FIBER DRUM	N <input type="checkbox"/> PLASTIC BOTTLE	
E <input checked="" type="checkbox"/> PLASTIC/NONMETALLIC DRUM	J <input type="checkbox"/> BAG	O <input type="checkbox"/> TOTE BIN	
STORAGE PRESSURE <input checked="" type="checkbox"/> AMBIENT <input type="checkbox"/> ABOVE AMBIENT <input type="checkbox"/> BELOW AMBIENT 228			
STORAGE TEMPERATURE <input checked="" type="checkbox"/> AMBIENT <input type="checkbox"/> ABOVE AMBIENT <input type="checkbox"/> BELOW AMBIENT <input type="checkbox"/> CRYOGENIC 229			

% WT	HAZARDOUS COMPONENT	RS *	CAS #
1 226	227	<input type="checkbox"/> YES <input type="checkbox"/> NO 228	229
2 230	231	<input type="checkbox"/> YES <input type="checkbox"/> NO 232	233
3 234	235	<input type="checkbox"/> YES <input type="checkbox"/> NO 236	237
4 238	239	<input type="checkbox"/> YES <input type="checkbox"/> NO 240	241
5 242	243	<input type="checkbox"/> YES <input type="checkbox"/> NO 244	245

* IF THE CHEMICAL IS A REGULATED SUBSTANCE AND MEETS OR EXCEEDS ITS THRESHOLD QUANTITY IN A PROCESS, THE AMOUNTS MUST BE REPORTED IN POUNDS, AND REGISTERED WITH THIS DEPARTMENT BY COMPLETING THE REGULATED SUBSTANCE REGISTRATION (OES FORM 2735.6) ON THE REVERSE SIDE OF THIS FORM.

OFFICIAL USE ONLY

DATE RECD				REVIEWED BY			
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA	

CALENDAR YEAR BEGINNING (19) [01/01/1995] ENDING (20) [12/31/1995] (21) PAGE 1 OF [2]
BUSINESS NAME (3) [FRED R RIPPY INC] BUSINESS PHONE (22) [(310) 698-9801]
SITE ADDRESS (23) [12471 E WASHINGTON BLVD] ⁵²
CITY (24) [WHITTIER] STATE [CA] ZIP (25) [
DUN & BRADST. (26) [SIC CODE (4 DIGIT #) (27) [3469]
OPERATOR NAME (29) [OPERATOR PHONE (30) [() -]

OWNER INFORMATION

OWNER NAME (31) [Francine H. Rippy] OWNER PHONE (32) [(562) 698-9801]
OWNER MAILING ADDRESS (33) [12471 E. Washington Blvd]
CITY (34) [Whittier] STATE (35) [CA] ZIP (36) [90602]

ENVIRONMENTAL CONTACT

CONTACT NAME (37) [Carol Casti II] CONTACT PHONE (38) [(562) 698-9801]
MAILING ADDRESS (39) [12471 E WASHINGTON BLVD]
CITY (40) [WHITTIER] STATE (41) [CA] ZIP (42) [90602]

PRIMARY

EMERGENCY CONTACTS

SECONDARY

PRIMARY	EMERGENCY CONTACTS	SECONDARY
NAME (43) [RICHARD R. RIPPY]	VIRGIL VIG]	NAME (48) [VIRGIL VIG FRANCINE H. RIPPY]
TITLE (44) [VICE PRESIDENT]	PLANT MANAGER]	TITLE (49) [PLANT MANAGER OWNER]
BUSINESS PHONE (45) (562) [(310) 698-9801]		BUSINESS PHONE (50) (562) [(310) 698-9801]
24-HOUR PHONE (46) 562-744 [(818) 333-4664]		24-HOUR PHONE (51) 362-333 3614 [(310) 944-5550]
PAGER # (47) 5550 [() -]		PAGER # (52) 626-333 [() -]

REGULATED SUBSTANCES (RS)

ON SITE RS (5) [NO]

ADDITIONAL LOCALLY COLLECTED INFORMATION

(53)

ASSESSOR'S PARCEL NUMBER _____	FOR OFFICIAL USE ONLY ID # _____
--------------------------------	-------------------------------------

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this inventory and believe the information is true, accurate and complete.

Print Name of Document Preparer (54) [Carrie Safian]
Signature of Owner/Operator (55) [Francine H. Rippy] Date (56) [6/22/98]

019-999-005309

FRED R RIPPY INC

12471 E WASHINGTON BLVD

4

28



PH# 174820 Paramount

LOS ANGELES COUNTY FIRE DEPARTMENT
HEALTH HAZARDOUS MATERIALS DIVISION
5825 Rickenbacker Road, Commerce, CA 90040

Enclosed are your
HAZARDOUS MATERIALS STATE REPORTING FORMS

Please follow these instructions carefully. Attached are your Hazardous Materials Reporting Forms. It is your responsibility to see that this Department receives your annual disclosure of hazardous materials. Failure to properly file these documents may result in fines and penalties.

- 1 - **ANNUAL REVIEW:** Review the attached computer generated inventory for your business.
To Revise: Cross out the old information and CLEARLY PRINT the corrected information. If the material is a Regulated Substance, then complete OES Form 2731 and OES Form 2735.6.
To Delete: Write DELETE across the chemical information.
To Add: Complete all the information on OES FORM 2731. One copy has been provided for you. Feel free to make as many copies as you need. If the chemical is a Regulated Substance, also complete OES Form 2735.6.
Additional Information: Complete the Facility Information Sheet (OES Form 2730), Business Plan and Site Map.
- 2 - **REGULATED SUBSTANCE REGISTRATION:** Be sure to check your chemical inventory against the Regulated Substance List. Any Regulated Substance above the Threshold Quantity, in a process, must be registered. To register, complete the registration OES Form 2731 and 2735.6. Please complete one Chemical Description Form for each Registered Regulated Substance per process.
- 3 - **RETURN DOCUMENTS IMMEDIATELY:** Please sign this certification sheet and return it along with the attached forms to the address at the top. It is recommended that your annual inventory be submitted via certified mail.

If you require assistance in completing this form, feel free to contact the Los Angeles County Fire Department, Health Hazardous Materials Division, Disclosure Unit at (213) 890-4000, Monday through Friday 8:00 a.m. to 4:30 p.m.

ANNUAL CERTIFICATION:

I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete. Enclosed is our chemical inventory (check all boxes that apply):

- ☐ **Delete:** There are chemicals that have been discontinued. These chemicals are clearly identified on the attached inventory.
- ☐ **Add:** There are new chemicals to report. Enclosed is OES Form 2731 for each new chemical.
- ☐ **Update:** There are a few corrections to be made. These corrections are clearly identified on the attached inventory.
- ☒ **No Change:** There are no changes to the current inventory. The computer printout is correct.
- ☐ **Regulated Substance Registration:** Enclosed is my Regulated Substance Registration (OES Form 2731 & 2735.6).

CARRIE SAFIAN
Print Name of Document Preparer

FRANCINE H. RIPPY
Print Name of Owner/Operator

Francine H. Rippy
Signature of Owner/Operator

1/6/99
Date

Busine019-999-005309
FRED R RIPPY INC
12471 E WASHINGTON BLVD

Facility ID Number



1674710000

LOS ANGELES COUNTY FIRE DEPARTMENT
HEALTH HAZARDOUS MATERIALS DIVISION
5825 Rickenbacker Road, Commerce, CA 90040

HAZARDOUS MATERIALS STATE REPORTING FORMS

Attached are your Hazardous Materials Reporting forms. It is your responsibility to see that these forms are completed and returned to this Department on or before December 31. Failure to complete or return these forms by December 31, will result in fines and penalties. If you require assistance in completing these forms, please feel free to contact the Los Angeles County Fire Department, Health Hazardous Materials Division, Data Operations Unit at (323) 890-4000, Monday through Friday 9:00 a.m. to 3:00 p.m.

In an effort to avoid any confusion or penalties levied on your business, this Department recommends you use CERTIFIED MAIL to ensure safe delivery of these forms before the December 31 deadline.

ANNUAL RE-CERTIFICATION PROCEDURE

Attached to this re-certification form is this Department's latest computer print-out of your chemical information. Carefully review and correct any information which may be incorrect or obsolete by crossing-out and writing in the changes. Check the appropriate box below after reviewing the computer print-out which most corresponds to your facility's information.

- ☐ **Delete:** If you no longer handle the chemical(s) listed on our chemical inventory computer print-out WRITE DELETE across the chemical information computer print-out(s) which have been discontinued.
- ☐ **Add:** If you are handling new chemical(s) not previously disclosed. MAKE COPIES AND COMPLETE all information on the Chemical Description form. If necessary complete Regulated Substance Registration form (one form per chemical).
- ☒ **Revise/Update:** If there are a few corrections to be made, cross out errors and clearly print the corrections directly onto the computer print-out. These corrections should be clearly identified on the attached chemical inventory print-out.
- ☐ **No Change:** If there are no changes to the current inventory, the computer printout is correct.
- ☐ **Regulated Substance Registration:** If you are handling a Regulated Substance not previously disclosed, you must COMPLETE the Regulated Substance Registration form. This Department has provided a list of Regulated Substances for your review.

ANNUAL CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete. Enclosed is our chemical inventory.

CARRIE J. SAFIAN
Print Name of Document Preparer

FRANCINE RIPPY
Print Name of Owner/Operator

Francine Rippy
Signature of Owner/Operator

12471 E. WASHINGTON BLVD, WHITTIER
Address

12/21/99
Date

019-999-005309

FRED R RIPPY INC

12471 E WASHINGTON BLVD

4

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DEC 23 1999

CALIFORNIA HAZARDOUS MATERIAL INVENTORY FORM - CHEMICAL DESCRIPTION PAGE

(19) []

PAGE (21) [2] OF (21) [2]

BUSINESS NAME (3) [FRED R RIPPY INC]

CHEMICAL LOCATION (58) [~~EAST WALL OF THE BLDG~~ North wall]

MAP# (59) [] GRID# ([])

CHEMICAL NAME (61) [Tetrachloroethylene]

TRADE SECRET (62) [NO]

COMMON NAME (63) [PERCHLOROETHYLENE]

RS (5) [NO]

CAS # (64) []

IF RS BOX IS YES ALL
AMOUNTS MUST BE IN LBS

FIRE CODE (65) []

HAZARD CLASSES* *COMPLETE BLOCK (65) IF REQUESTED BY THE LOCAL FIRE CHIEF

TYPE (66) [Pure]

RADIOACTIVE (67) [NO] (68) [0.00000]

PHYSICAL STATE (69) [Liquid]

CURIES

FED HAZARD (70) [REACTIVE]

CHRONIC HEALTH []

CATEGORIES

STATE WASTE (71) [] UNITS (74) [GAL] MAX DAILY AMT (72) [190.00]
CODE

DAYS ON SITE (73) [365] IF EHS, AMOUNTS MUST AVG DAILY AMT (75) [104.00]

LARGEST CONT. (76) [0.00] BE IN LBS. ANNUAL WASTE AMT (77) [0.00]

STORAGE (78) [Tank inside Building]
CONTAINERSTORAGE (79) [Ambient]
PRESSURESTORAGE (80) [Ambient]
TEMPERATURE

%WT	HAZARDOUS COMPONENT	RS	CAS
(81) []	(82) []	(83) []	(84) []
(85) []	(86) []	(87) []	(88) []
(89) []	(90) []	(91) []	(92) []
(93) []	(94) []	(95) []	(96) []
(97) []	(98) []	(99) []	(100) []

ADDITIONAL LOCALLY COLLECTED INFORMATION

FOR OFFICIAL USE ONLY

ID# _____

(19) []

PAGE (21) [2] OF (21) [2]

BUSINESS NAME (3) [FRED R RIPPY INC]

CHEMICAL LOCATION (58) [NORTH WALL]

MAP# (59) [] GRID# ([])

CHEMICAL NAME (61) [Tetrachloroethylene] TRADE SECRET (62) [NO]

COMMON NAME (63) [PERCHLOROETHYLENE] RS (5) [NO]

CAS # (64) [] IF RS BOX IS YES ALL AMOUNTS MUST BE IN LBS

FIRE CODE (65) []

HAZARD CLASSES* *COMPLETE BLOCK (65) IF REQUESTED BY THE LOCAL FIRE CHIEF

TYPE (66) [Pure] RADIOACTIVE (67) [NO] (68) [0.00000]

PHYSICAL STATE (69) [Liquid] CURIES

FED HAZARD (70) [] CHRONIC HEALTH []

CATEGORIES

STATE WASTE (71) [] UNITS (74) [LBS] MAX DAILY AMT (72) [2800.00]

CODE

DAYS ON SITE (73) [365] IF RS, AMOUNTS MUST AVG DAILY AMT (75) [1137.00]

LARGEST CONT. (76) [0.00] BE IN LBS. ANNUAL WASTE AMT (77) [0.00]

STORAGE (78) [Plastic/Non-metal Drum]

CONTAINER

STORAGE (79) [Ambient]

PRESSURE

STORAGE (80) [Ambient]

TEMPERATURE

%WT	HAZARDOUS COMPONENT	RS	CAS
(81) []	(82) []	(83) []	(84) []
(85) []	(86) []	(87) []	(88) []
(89) []	(90) []	(91) []	(92) []
(93) []	(94) []	(95) []	(96) []
(97) []	(98) []	(99) []	(100) []

ADDITIONAL LOCALLY COLLECTED INFORMATION

FOR OFFICIAL USE ONLY

002-0001

ID# _____

BUSINESS NAME (3) [FRED R RIPPY INC]
 CHEMICAL LOCATION(58) [NORTH WALL]
 MAP# (59) [] GRID# ([]

CHEMICAL NAME (61) [] TRADE SECRET (62) [NO]
 COMMON NAME (63) [PERCHLOROETHYLENE] RS (5) [NO]
 CAS # (64) [] IF RS BOX IS YES ALL
 AMOUNTS MUST BE IN LBS

FIRE CODE (65) []

HAZARD CLASSES* *COMPLETE BLOCK (65) IF REQUESTED BY THE LOCAL FIRE CHIEF

TYPE (66) [Pure] RADIOACTIVE (67) [NO] (68) [0.00000]

PHYSICAL STATE (69) [Liquid] CURIES

FED HAZARD (70) [] CHRONIC HEALTH]

CATEGORIES

STATE WASTE (71) [] UNITS (74) [LBS] MAX DAILY AMT (72) [2800.00]

CODE

DAYS ON SITE (73) [365] IF RS, AMOUNTS MUST AVG DAILY AMT (75) [1137.00]

LARGEST CONT. (76) [0.00] BE IN LBS. ANNUAL WASTE AMT (77) [0.00]

STORAGE (78) [Plastic/Non-metal Drum]
 CONTAINER

STORAGE (79) [Ambient]
 PRESSURE

STORAGE (80) [Ambient]
 TEMPERATURE

%WT	HAZARDOUS COMPONENT	RS	CAS
81) [100.00]	(82) [Perchloroethylene]	(83) [NO]	(84) [127184]
85) []	(86) []	(87) []	(88) []
89) []	(90) []	(91) []	(92) []
93) []	(94) []	(95) []	(96) []
97) []	(98) []	(99) []	(100) []

ADDITIONAL LOCALLY COLLECTED INFORMATION

FOR OFFICIAL USE ONLY

002-0001

ID#



County of Los Angeles • Fire Department
Health Hazardous Materials Division

INSPECTION REPORT

DATE: 01/05/2000

PAGE 3 OF 4

DBA: Fred R. Rippy, Inc.	Facility ID #: 5309/W174810
LIST ORDER OF INSPECTION AS FOLLOWS:	I. OPENING CONFERENCE II. WALK THROUGH III. DOCUMENTS IV. CLOSING CONFERENCE V. VIOLATIONS

II. Warehouse

One nitrogen canister - about 100 cubic feet
One oxygen canister - 154 cubic feet
One acetylene canister - 111 cubic feet
One argon canister - 154 cubic feet
Scrap metal drums. Particle size all > 100 microns
One oxygen canister - 244 cubic feet
One Propane ^{canister} about 32 gallon capacity
Two spare propane forklift canisters - ~~at~~ 8 gallons each
Storage of used EDM filters in box. About 4 filters total. No label
Outdoors North side of building

empty drum storage

III. Review of 1998 Disclosure file - comparison with HM Inventory observed during 01/05/2000 walkthrough

Inventory reviewed 01/08/99

Perchloroethylene 2800 lbs. Disclosed 3 times

^{Triplicate}
^{Sheet}

Vaseline oil - 165 gallons

Way lube oil - 85 gallons

^{and Site Map}
BP dated 01/08/99. Satisfactory.

Oxygen - 398 cubic feet

Acetylene - 111 cubic feet

Total ~~250~~ 250 gallons 509 cubic feet still in group

but all above chemicals have never been disclosed - business

must submit 2731 forms for each chemical & delete

perchloroethylene

Manifest Review

Waste oil 06/07/99 manifest #9802692 30 gallons ^{#221} Transporter: GT Pumping 9886 Cullman Ave. W. Little - 90603 (S802/94) EPA# CAD981

TSDI: Industrial Service 1700 S. 6th St. Los Angeles EPA# CAD099452708. Existing drum 2/3 full.



County of Los Angeles • Fire Department
Health Hazardous Materials Division

INSPECTION REPORT

DATE: 01/05/2000

PAGE 4 OF 4

DBA:

Fred R. Rippey, Inc.

Facility ID #:

5309 00174810

LIST ORDER OF INSPECTION AS FOLLOWS:

I. OPENING CONFERENCE
IV. CLOSING CONFERENCE

II. WALK THROUGH
V. VIOLATIONS

III. DOCUMENTS

III. Perchloroethylene - Final disposal 02/04/98 54 gallons #211/0039 Manifest # 77247891
TSDF
Trans Rho-Chem 425 I. St. Ave. Inglewood 90301 EPA # CAD008311432
Any Fresh Perc has evaporated since then per Virgil V.
used aqueous degreaser - uses deionized water wastewater goes to 5 gallon container
on roof. Water evaporates & oily sludge remains. This process is being eliminated
next month. Fred R. Rippey, Inc. has retained the services of profit organization
headed by Katy Wolf, who has done work for DTSC to come up with alternative, an
ultrasonic degreaser. Existing system was deregulated from TP requirements last year.

used EDM Filters - ^{Never disposed} not enough on site to require disposal. < 100 kg on site. Each filter about 15 lbs
waste filters in box. 60 lbs on site

Sandblast/lead dust - ^{disposed to trash} ~~disposed to trash~~ ^{Nov} ~~disposed to trash~~

No uniform/laundry service. No oily rags observed on site.

IV. Per Carrie Satian of Fred R. Rippey Company, 1999 Disclosure was mailed to Cal. Operations Unit on
12/4/99 and deleted Perc (the only item on inventory).

HM Nov issued to complete 2736 for Vanishing Oil, Way-Lube Oil, Acetylene & Oxygen
and provide copies to this office. Copies will be forwarded to Cal. Operations Unit
and HM license will be kept active.

HW NOV ^{issued to provide HM determination on sandblast/lead dust} ~~issued to provide HM determination on sandblast/lead dust~~ ^{other} ~~issued to provide HM determination on sandblast/lead dust~~
Good compliance. No major violations observed. Accumulation of waste
oil slightly > 180 days but volume generated < 100 kg. Waste EDM filter volume
also < 100 kg. Advised Virgil V. to ^{aqueous degreaser's} ~~comingle~~ ^{& waste remedian} ~~comingle~~ oil residue ~~for~~ ~~comingle~~
with drum of waste oil when it is next disposed

HW Labels issued. Permit Fee notification & Compliance certification issued

V. # 202 # 204 # 205. 3 HM violations

501. 1 Class 2 HW violation